Form **88/1**(July 2000) Department of the Treasury

Notice of Section 527 Status

OMB No. 1545-1693

ENVELOPE JIII 3 0 2000

| Intern | al Revenue Service | | | | | |
|--------|---|----------------------------|---|------------------------------|--------------------------------|--|
| Pa | rt I General Informatio | 'n | | | | |
| 1 | Name of organization | | | | Employer Identification number | |
| | Frank O'Brien for City Cou | | | | 95 4772211 | |
| 2 | Mailing address (P.O. Box or number, street, and room or suite number) 555 S. Flower Street, Suite 4510 | | | | | |
| | City or town, state, and ZIP cod Los Angeles, CA 90071 | le | | | 190.40 | |
| 3 | E-mail address of organization digouldco@aol.com | | | | | |
| 4a | Name of custodian of records | | 4b Custodian's address 555 S. Flower Street, Suite 4510 | | | |
| | David L. Gould Company | | Los Angeles, CA 90071 | | | |
| 5a | , | | 5b Contact person's address 555 S. Flower Street, Suite 4510 | | | |
| | Michelle Moore-Sanders | | Los Angeles, CA 90071 | | | |
| 6 | Business address of organization | n (if different from maili | ng address sho | wn above). Number, street, a | nd room or suite number | |
| | City or town, state, and ZIP cod | e | | | 1,000 | |
| Par | rt II Purpose | " | | | *** | |
| 7 | Describe the purpose of the org | anization | | | | |
| | Elect Candidate | | | | | |
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| | it III List of All Related | | | , , | | |
| 8a | Name of related entity | 8b Relationsh | ip 8 | 3c Address | | |
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| Form 8871 (7-2000) Part IV List of All Officers | s. Directors, and High | Page 2 Ily Compensated Employees (see instructions) | | |
|--|----------------------------------|---|--|--|
| 9a Name | 9b Title | 9c Address | | |
| David L. Gould Company | Treasurer | 555 South Flower Street, Suite 4510 | | |
| | Treasurer | Los Angeles, CA 90071 | | |
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| Under penalties of perjury, Revenue Code, and that I h it is true, correct, and comp | ave examined this notice, includ | named in Part I is to be treated as an organization described in section 527 of the internation accompanying achedules and statements, and to the best of my knowledge and belief | | |
| Sign Signature of authorize | zed official | 7-19-20 Date | | |